

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

PLEASE PRINT

OCT 25 2017

I. Name of Lobbyist(s) Douglas L. Patch		NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's partnership, firm or corporation, if any:		-W OF STATE
Orr & Reno, P.A.		
(Name of partnership, firm or corporation)		
45 S. Main St. PO Box 3550 Concord	NH	03302
Business Address: (Street) (Town/City)	(State)	(Zip Code)
(603) 224-2381 (603) 224-2318 (Fax)	e-mail_dpatch	@orr-reno.com
III. This statement covers: (Choose one – file separate reports for ϵ reportable expense transactions which are not attributable to any ϵ		y file a separate report for
All reportable transactions occurring in the months prior to the repo	orting date relative to th	e following client:
New England Backflow, Inc. (Full Name of Client as it appears on the Lobbyist R	Registration Form)	
<u>OR</u>		
☐ All reportable transactions by the lobbyist (including the lobbyist's unrelated to any particular client.	family), or the lobbying	firm listed below which are
IV. Date of Report April 26, 2017 Reports cover: activity from date of registration to 3/31/17 activ	July 26, 2017 🔲	
October 25, 2017	January 31, 2018	
	vity from 10/1/17 to 12/31/	/17
V. There have been no fees received and no reportable trans. If this box is checked, complete just this form and submit it to the Secre Concord, NH 03301.	actions made since the etary of State's Office, S	he last report. Ctate House, Room 204,
VI. Check if additional reports are attached:		
If you have received fees or made expenditures, you must file Add	lendum A- Fees and Ex	kpenses
 If you have paid an honorarium or reimbursed expenses, you must Expense Reimbursement 	file Addendum B-Re	port of Honorariums or
☐ If you, your firm, or your family has made political contributions,	you must file Addendu	m C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby s and complete to the best of my knew ledge and belief.	wear or affirm that the f	foregoing information is true
\sim	10/25/17 (Dat	
(Signature of Tobby ist)	(Dat	e)
Douglas L. Patch		
(Print Name of lobbyist)		

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Douglas L. Patch		
II. Name of lobbyist's partnership, firm or corporation, if any:		
Orr & Reno, P.A.		
(Name of partnership, firm or corporation)		· · · · · · · · · · · · · · · · · · ·
III. Name of Client New England Backflow, Inc.	Date _1	0/25/17
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, o	r public relations service
a) Total of all fees received in this reporting period	a) \$	562.50
b) Total of all fees received this calendar year, prior to this reporting period	b) \$	9,162.50
(This should equal the total of all prior monthly reports for this calendar ye	ear)	
c) Total of all fees received to date (Add lines a and b)	c) \$	9,725.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if may be filed a aggregate (penses; (b) le: meals pu so than \$10 and with a val orting period are of greates or than \$25, expense re	expenditures are made d for the lobbyist(s)/fin total of all expenses pa the aggregate total of rehased during a busine that is given to the perso lue of \$25.00 or less); a of greater than \$25.00 or than \$25, purchase of but not greater than \$5 simbursement, or politic
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$	0.00
in a), of \$25 or less.	b) \$	0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00

d) Total expenses for this reporting period (Add lines a, b and c) e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) f) Total of all expenses year to date VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this period, including by whom paid or to whom charged. Paid to: Amount: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
(This should be the amount on line f of addendum A for last month's report) f) Total of all expenses year to date VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this period, including by whom paid or to whom charged. Paid to: Amount: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this period, including by whom paid or to whom charged. Paid to: Amount: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	50.00
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\$	reporting
\$\$ \$\$ \$\$ \$\$ \$\$ Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing in	
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is two and complete to the heat of my knowledge and helief	formation
is true and complete to the best of my knowledge and belief.	
10/25/17	
(Signature of bybyist) 10/25/17 (Date)	
Douglas L. Patch	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Stater	nent/Aff	ĭrma	tion	by L	obbyist
Statem	ent of	Income	and	Ехре	enses	for:

Name of Lobbying partnership, firm, or corporation:	Orr & Reno, P.A.
Name of Client (leave blank if Statement is for the par	tnership, firm, or corporation and not related to any
particular client): New England Backflow,	Inc.
Date of Report (check one):	
April 26, 2017 □ July 26, 2017 □ Octob	er 25, 2017 ☑ January 31, 2018 □
I have read RSA 15, RSA 15-B, RSA 664, the Staten the following Addendums submitted with that Staten submitted):	•
1 Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing informatio complete to the best of my knowledge and belief. (Signature of lowbyist)	n on the Statement and each Addendum is true and $\frac{10/25/17}{\text{(Date)}}$
Douglas L. Patch	
(Print Name of Johnvist)	